

**THE STATE OF NEW HAMPSHIRE**  
**JUDICIAL BRANCH**  
<http://www.courts.state.nh.us>

Court Name: \_\_\_\_\_  
Case Name: \_\_\_\_\_  
Case Number: \_\_\_\_\_

**JUVENILE ABUSE/NEGLECT ORDER  
ON EXTRAORDINARY CIRCUMSTANCES**

*FOR USE WHEN: If the adjudicatory hearing cannot be held and completed within 30 calendar days of the filing of the petition, the court shall issue written findings of extraordinary circumstances, pursuant to RSA 169-C:15,III(d). In all cases, the adjudicatory hearing must be held, completed, and orders issued within 60 calendar days of the filing of the petition.*

- ☐ A motion was filed on \_\_\_\_\_ (date) by \_\_\_\_\_ requesting a finding of extraordinary circumstances and a new date for the adjudicatory hearing.
- ☐ The motion was assented to by all parties.
- ☐ The motion was not assented to by: \_\_\_\_\_

☐ Pursuant to RSA 169-C:15,III(d), this court finds extraordinary circumstances as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- ☐ This court does not find extraordinary circumstances.
- ☐ The adjudicatory hearing is scheduled for \_\_\_\_\_
- |      |      |          |
|------|------|----------|
| Date | Time | Location |
|------|------|----------|

**Recommended:**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Marital Master

\_\_\_\_\_  
Printed Name of Marital Master

**So Ordered:**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Judge

\_\_\_\_\_  
Printed Name of Judge

- |                                                                                                                                                          |                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| C: <input type="checkbox"/> Mother<br><input type="checkbox"/> Father<br><input type="checkbox"/> DCYF<br><input type="checkbox"/> Attorney(s) of Record | <input type="checkbox"/> Guardian <i>ad Litem</i><br><input type="checkbox"/> _____ School District (Sending)<br><input type="checkbox"/> _____ School District (Receiving)<br><input type="checkbox"/> Other: _____ |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|